

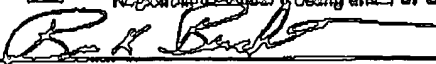
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PTO/BA/23 (12-04)

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.133(d)</b>		<b>Serial Number (Optional)</b>	
FY 2005 (Fee pursuant to the Consolidated Appropriations Act, 2000 (H.R. 4010))		6169-141	
<b>Application Number</b> 09/749,480		<b>Filed</b> December 28, 2000	
<b>For</b> METHOD FOR TOUCHSCREEN DATA INPUT			
<b>Art Unit</b> 2674		<b>Examiner</b> NGUYEN, KIMNHUNG T.	
This is a request under the provisions of 37 CFR 1.133(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<b>Fee</b>	<b>Small Entity Fee</b>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$50	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 450
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1580	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2035 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0251</u> . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2035.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/26).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>62,897</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34.			
Registration number listing under 37 CFR 1.34 _____			
		JULY 14, 2005	
Signature		Date	
BRIAN K. BUCHHEIT		561-653-5000	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.			
<input type="checkbox"/> Total of _____ forms are submitted.			

This collection of information is required by 37 CFR 1.133(d). The information is required to establish or retain a benefit by the public when it is filed (and by the USPTO to process) an application. Confidentiality is provided by 35 U.S.C. 123 and 37 CFR 1.11 and 1.14. This collection is submitted to the public in order to complete, including gathering, preparing, and submitting the completed application form to the USPTO. This is very important to the public. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 4608, Alexandria, VA 22304-4608. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Call the Commissioner for Patents, P.O. Box 4608, Alexandria, VA 22304-4608.

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